	on Premises During Construction	PERMIT 000035811
APPLICANT HAYDEN LUNDE	PHONE 386-867-1213	000033811
ADDRESS 618 SW FLORIDA GATEWAY DR		L 32024
OWNER ARTHUR FLEMING	PHONE 386-965-9409	2021
ADDRESS 328 SW FIELDSTONE CT		L 32024
CONTRACTOR BLAKE LUNDE	PHONE 754-5810	
LOCATION OF PROPERTY 90 W. L INTO EMERALD COVE	E. R FIOELDSTONE CT, LOT ON RIGHT	
TYPE DEVELOPMENT SFD, UTILITY ES	TIMATED COST OF CONSTRUCTION	143750.00
HEATED FLOOR AREA 2045.00 TO TAL ARE	A 2875.00 HEIGHT	STORIES 1
FOUNDATION CONCRETE WALLS FRAMED F	ROOF PITCH FLOO	R SLAB
LAND USE & ZONING RSF-2	MAX. HEIGHT 35	
Minimum Set Back Requirments: STREET-FRONT 25.00	REAR 15.00 SI	DE 10.00
NO. EX.D.U. 0 FLOOD ZONE X	DEVELOPMENT PERMIT NO.	
LOT 59 BLOCK PHASE 2 UNIT	TOTAL ACRES 0.51	
000002476CBC1253408	x Harsh	
Culvert Permit No. Culvert Waiver Contractor's License Nun CULVERT 17-0564-N BS	nber Applicant/Owner/Cor	ntractor
Driveway Connection Septic Tank Number 1.0 & Zoning check		Time/STUP No.
COMMENTS: FLOOR ONE FOOT ABOVE THE ROAD, NOC ON FI		
	Check # or Cash	1352
FOR BUILDING & ZONIN	IG DEPARTMENT ONLY	(footer:Slab)
Temporary Power Foundation	Monolithic	(footer Slab)
Temporary Power Foundation date/app. by	date/app. by	date/app. by
Temporary Power Foundation date/app. by Under slab rough-in plumbing Slab date/app. by	date/app. by Sheathing/Nail	date/app. by
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"WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT."

EVERY PERMIT ISSUED SHALL BECOME INVALID UNLESS THE WORK AUTHORIZED BY SUCH PERMIT IS COMMENCED WITHIN 180 DAYS AFTER ITS ISSUANCE, OR IF THE WORK AUTHORIZED BY SUCH PERMIT IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AFTER THE TIME THE WORK IS COMMENCED. A VALID PERMIT RECIEVES AN APPROVED INSPECTION EVERY 180 DAYS. WORK SHALL BE CONSIDERED NOT SUSPENDED, ABANDONED OR INVALID WHEN THE PERMIT HAS RECIEVED AN APPROVED INSPECTION WITHIN 180 DAYS OT THE PREVIOUS INSPECTION.